ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,
ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6. December 21 JUDITH C. RHODES FISCAL OFFICER
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE VOUCHER REGISTER, CONSISTING OF
PAGES, AND EXCEPT FOR VOUCHERS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH VOUCHERS ARE HEREBY ALLOWED
IN THE TOTAL AMOUNT OF \$ 685.92 . DATED THIS 21st DAY OF December 2010.
APPROVED BY STATE BOARD OF ACCOUNTS IN 2001 FOR CITY OF WEST LAFAYETTE

12/21/10 11:34:33

ACCOUNTS PAYABLE VOUCHER REGISTER

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CITY OF WEST LAFAYETTE

FOR THE PERIOD OF 12/21/10 - 12/21/10

CHECK \	OUCHER VENDOR NAME		DUE DATE							amount
P0 #	INVOICE NUMBER	DESCRIPTION	FND	PROGRAM (DBJECT	CC ACCOUN	T TITLE	VOUCHER /	AMOUNT	ALLOWED
2241	2241 JASON BURKS,	FLEX ACCOUNT	12/21/10							
		FLEXIBLE PLAN-DEP	819	819.00	.00	0 FLEXIBLE	PLAN DEPENDENT CARE		186.00	186.00
							CHECK AMOUNT		186.00	
2242	2242 NANCEE HETRI	CK, FLEX ACCOUNT	12/21/10							
	FLEX PLAN	FLEXIBLE PLAN-MED	811	811.00	.00	0 FLEXIBLE	PLAN MEDICAL		499.92	499.92
							CHECK AMOUNT	4	499.92	
			PRE-WRITTEN TOTAL 688					685.92		
			GRAND TOTAL				(685.92		

12/21/10 11:34:33 FUND SUMMARY

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CITY OF WEST LAFAYETTE

FUND D	DESCRIPTION	VOUCHER TOTAL	
811 F	FLEXIBLE PLAN MEDICAL	499.92	
819 F	FLEXIBLE PLAN DEPENDENT CARE	186.00	
	GRAND TOTAL	685.92	